



Senators Feinstein and Boxer Highlight Need for Amendments to Prevent Funding Cuts in Ryan White Reauthorization Bill

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Washington, DC – U.S. Senators Dianne Feinstein and Barbara Boxer (both D-Calif.) today expressed their concerns that the current version of the Ryan White reauthorization bill does not provide adequate funding to sustain care and treatment for HIV/AIDS patients across the country, and called on the Senate Leadership to allow consideration of the bill under regular order on the Senate Floor.

In a letter to Senate Majority Leader Bill Frist (R-Tenn.) and Senate Minority Leader Harry Reid (D-Nev.), Senators Feinstein and Boxer highlighted the need for amendments to be offered, debated, and voted upon to preserve funding for established programs across the country.

“California HIV/AIDS projects take a big financial hit under the current version of the Ryan White reauthorization bill. Without the opportunity to offer amendments, there is a serious risk that established programs in San Francisco and across the state will be unable to preserve the quality of care they provide to HIV/AIDS patients,” Senator Feinstein said.

“If the Bush Administration would put adequate resources into the fight against HIV/AIDS, we wouldn’t be having this argument about a formula. It’s unacceptable that California, and therefore our HIV/AIDS patients, will suffer if we don’t go along with every detail of this bill,” Senator Boxer said.

Following is the text of the letters sent today by Senators Feinstein and Boxer to Senators Frist and Reid:

“We are writing to express our ongoing concerns about the impact the current version of the Ryan White reauthorization bill will have on California. The bill, as currently drafted, has the potential to greatly destabilize our state’s system of HIV /AIDS care. We ask that you allow consideration of the bill under regular order on the Senate floor, so that amendments can be offered, debated, and voted upon.

While we have supported the bipartisan, bicameral process through which this reauthorization has been developed, we are disappointed that the final product seeks to expand services to HIV /AIDS patients without the requisite funding increase to enable jurisdictions with older epidemics to continue to provide necessary services. Already, grantees are struggling to

maintain services to patients in light of a decline in Ryan White CARE Act funds by approximately 25 percent since 2000 in constant dollars.

Therefore, we were dismayed to learn that you intend to pass this bill by unanimous consent, denying Senators the opportunity to offer amendments. We are not members of the Senate Health, Education, Labor and Pensions Committee, and therefore considering the bill on the Senate floor offers us the only opportunity to propose and consider changes that may be critical for the sustained care and treatment of HIV/AIDS patients around the country.

California could well be seriously impacted by a provision in the bill that distributes funds in the final year based on states' names-based HIV counts. The state will make every possible effort to expedite the transition to a new names-based HIV reporting system by Fiscal Year 2011, but the experiences of other large states suggest that it takes more than four years for a large state to fully transition to a names-based HIV system. It is unlikely that California will have successfully moved all HIV cases into a names-based system by this deadline. As a result, the state of California projects that its funding could drop significantly in the final year of the reauthorization, resulting in a total loss of as much as \$50 million.

Given the opportunity, we would like to offer an amendment on the Senate floor permitting the Secretary of Health and Human Services to certify whether a state has made good faith efforts to fully complete the transition to a names-based system, and use some or all of that state's code-based HIV data in calculating FY2011 funding if that certification is made. We are confident that, given sufficient time, a names-based HIV reporting system will reflect that California remains an epicenter of the HIV/AIDS epidemic.

We are also interested in offering an amendment to stem the anticipated devastating loss to San Francisco starting in Fiscal Year 2010. For a variety of reasons, many jurisdictions hardest hit by the epidemic - including San Francisco, Chicago, and New York City - will be adversely affected under the bill as drafted. The Senate should have a full debate on the impact these proposals have on HIV/AIDS patients in all areas. We owe it to the HIV/AIDS patients in all states to preserve the systems of care upon which they rely.

In the interest of promoting stability of funding for HIV/AIDS care and treatment, these and other potential amendments are worthy of full consideration on the Senate floor. Please notify us as to whether you will allow Senators to offer amendments to the bill. We look forward to working with you to craft a reauthorization that meets the needs of all HIV/AIDS patients."

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